

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>HS</i>		4-14-98
O.I.P.E. CLASSIFIER	<i>P.D.</i>	<i>63</i>	
FORMALITY REVIEW	<i>PAWS</i>	<i>170097</i>	5-6-98

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	9/20/98
2	9/20/98
3	9/20/98
4	9/20/98
5	9/20/98
6	9/20/98
7	9/20/98
8	9/20/98
9	9/20/98
10	9/20/98
11	9/20/98
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44	9/20/98
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47	9/20/98
48	9/20/98
49	9/20/98
50	9/20/98

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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